STATE OF UTAH
DEPARTMENT OF NATURAL RESOURCES
DIVISION OF OIL, GAS AND MINING
355 West North Temple
3 Triad Center, Suite 350
Salt Lake City, Utah 84180-1203
Telephone: (801) 538-5340

ANNUAL REPORT OF MINING OPERATIONS

The informational requirements of this form are based on provisions of the Mined Land Reclamation Act, Title 40-8, Utah Code Annotated 1953, as amended, and the General Rules as promulgated under the Utah Minerals Regulatory Program. An operator conducting mining operations under a Notice of Intention must file an annual operations and progress report (FORM MR-AR) with the Division.

I.	GENERAL	INFORMATION
1.	GLINERAL	TIALOKINALION

۱.	Report Time Period:	From (mo./yr.) <u>1-87</u> To (mo./yr.) <u>12-8</u>	
2.	DOGM File Number (original notice): ACT / 017 / 001		
3.	Mine Name:Tony M/Lucky Strike		
	Mineral(s) Mined: Uranium		
5.	Name of Operator or	Company: Plateau Resources Limited	
		P.O. Box 2111 - Ticaboo	
		Lake Powell, UT 84533	
		(801) 788-2120	
	Company Representat	ive (or designated operator):	
	Name:	William H. Collins	
	Name:	William H. Collins	

 $|\overline{\mathbb{X}}|$ Please check if any of the above information has changed since previous year.

II. MINING AND RECLAMATION

- 1. Was the mine active during the past year? Yes $|\mathbb{Z}|$ No $|\mathbb{X}|$
- 2. If active, how much ore or mineral was mined? __1,226 tons (assessment only)

3	occurred during the na			
4	employed, and an evalu	eclamation work performed during the past n should include acreage reclaimed, methods ation of the results.		
	None			
į	10-1			
5.		eclaimed acreage at years end? Approx. 52 acres		
6.	Briefly summarize mining and reclamation planned for the upcoming year. None			
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III. A	DDITIONAL INFORMATION			
1.	An updated surface faci been significant change	An updated surface facilities map should be attached if there have been significant changes since the previous map was submitted.		
2.	Any monitoring results	Any monitoring results or other reports that are required under the terms of the approved notice of intention should also be attached.		
IV. SI	GNATURE REQUIREMENT			
I	hereby certify that the fo	regoing is true and correct.		
	Signature of Operator:	William H Collins		
	Name (Typed or Print):	William H. Collins		
	Title of Operator:	Project Supervisor		
	Date	January 7 1988		